OIDL Space Allocation Request Form

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The ICE office mailing address is:
Jet Propulsion
Laboratory
4800 Oak Grove Drive
MS. 301-486
Pasadena, CA 91109
The ICE fax number is:
(818) 393-2412
* required fields
Project Name: *
Experiment Name: *
Expected Period of Occupancy: *
Preferred Location of Experiment: (e.g. High Bay/Low
Bay/GSE)
  1st
  Choice:
  2nd
  Choice:
Are you vacating existing space?
                                  YES
                                           NO
         Where is the vacated
         space?
         How much space is
         being vacated?
         Are you being forced to
                                  YES
                                           NO
         leave?
```

Rationale for space request: * (If you are leaving existing space, please explain the circumstances)

Descri	ption	of	work

Amount of space needed: *

(contact Barbara

Bleiler: ext. 4-4254 for

dimensions of labs)

ft. by ft.

Requirements:

Check for YES

Vibration isolation:

Compressed air:

Chilled water:

Clean Electrical Power/ UPS protection

amount of power:

Do you need a "Clean Room" laboratory space?

If modifications need to be made to the space, what is the estimate

cost?

Do you have or anticipate having the resources to pay for the modifications?

If so, what is your account

number?

1
Upload request space / expected layout (or email Marty Levine)
Liquid Nitrogen
Gaseous Nitrogen:
Other:
Originator's name: *
Phone No.
Email
Manager's name and concurrence: *